**2018 Summer Camp REGISTRATION FORM**

**Player Name:­­**

**Birth Date:**

**Circle One:** Beginner, HL, AE, A, AA, AAA

**Address:**

**Phone Number:**

**Email Address:**

* **Summer Camp Monday August 20th to Friday August 24**

**Each Option** Full Day $438.05 + HST ($495.00)

Payment: $ Remaining Balance: $

A 50% deposit in the form of a cheque must be included with the registration form with the remainder of the payment due on the first day of the program chosen. A charge of $25.00 will be incurred for any NSF cheques. No refunds on deposits.

**By signing this registration form as the Parent/Legal Guardian of the above-named Player, I understand and agree that the proprietors, employees and instructors are not responsible for any injury, accident, loss or damage of any kind sustained by the above-named Player, any other player or any other person, in connection with South Simcoe Hockey School.  I understand, appreciate and accept the risks associated with enrolling the Player in the hockey school and all related activities, and I agree to waive any claim and to release the proprietors, employees and instructors from all claims, losses, liabilities and damages, which may arise as a result.**

Signature of Parent or Legal Guardian:

Print Name: Date:

How did you hear about us?:

**Mail your registration form & deposit to:**

**South Simcoe Hockey School** PO Box 7085 Innisfil ON. L9S 1A8 – (705) 252-3858

[**www.southsimcoehockey.com**](http://www.southsimcoehockey.com)